

Wildlife Rehabilitation License Large Mammal

This application request for is not a license and does not grant nor convey any additional authority.

Request Form

For more information on this license visit www.dec.ny.gov/permits/25027.html

To request authority to rehabilitate large mammals, please complete all of the sections below. Attach additional sheets if needed. **PLEASE TYPE OR PRINT CLEARLY.**

Last First M.I.

License Type License Number Expiration Date

I request to have the license listed above modified to allow rehabilitation of the following species. White-tailed Deer American Black Bear Moose

The large mammal species requested above will be held for rehabilitation at the following facility.

Facility Address

City County Zip Code

In the space provided below, describe the physical features of the facility where the large mammal species will be held for rehabilitative purposes. Describe the fencing including material, dimensions and height. If multiple pens are used, describe each separately. List all natal care facilities, and juvenile holding areas. List shelters provided, natural browse available, and habitat type - % wooded, open field, etc. Include photographs or diagrams of the facilities. NOTE: All caging must at a minimum meet the specifications listed in the current edition of The [NWRA/IWRC Minimum Standards for Wildlife Rehabilitation](#).

List the distance between all provided caging and pens to human dwellings, driveways and roads.

Describe the visual screening barrier that will be used so that animals within the enclosure will not be able to have direct view of human activity.

Describe the methods you will use to feed the animals during all stages of rehabilitative care. For juveniles in outdoor enclosures, blind feeding, where you do not have to enter the enclosure is recommended.

List the techniques, items, and habitat you will provide to foster the development of appropriate animal behavior needed for successful release.

Describe the experience you have rehabilitating large mammals. Include all hands-on training, training courses including safe capture techniques, animal care, animal nutrition, disease and parasite recognition, euthanasia, and all other relevant experience and training.

Describe the methods and techniques you will use for release of successfully rehabilitated animals to the wild. If you will be releasing rehabilitated animals directly from your facility, describe the surrounding area including habitat and acreage. **For release of white-tailed deer only. All black bear will be transported and released by DEC staff.**

Do you work with a participating Veterinarian who provides guidance for animal care and nutrition, disease recognition, prevention and control, quarantine techniques, and euthanasia procedures following AVMA accepted standards?

Yes No

IMPORTANT: You may not undertake any of the requested activities until the Department has reviewed and approved your request **AND** you receive an amended license from the Department. This Request Form is not a license and does not grant nor convey any additional authority.

***NOTICE: False statements made herein are punishable as a Class A Misdemeanor pursuant to Section 210.45 of the penal law.**

Applicant's Signature _____

Date _____

MAIL YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENT(S) TO:

NYS Department of Environmental Conservation
Special Licenses Unit · 5th Floor
625 Broadway, Albany, New York 12233

For questions or concerns, please contact us
Phone: (518) 402-8985 · Fax: (518) 402-8925
Email: SpecialLicenses@dec.ny.gov
Website: www.dec.ny.gov/63.html

Please allow 45 days for DEC to review and process your application.

¹Incomplete or vague applications will be returned and delay the processing of your permit.